	The state of the s
<ul> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> </ul>	A. Signature  A. Signature  A. Signature  A. Signature  C. Date of Delivery
Article Addressed to:	D. Is delivery address different from item 1?  Yes
Warden Arnold Holt Bullock County Correctional Facility PO Box 5107	2:04CV 580 C+0
Union Springs, AL 36089	3. Service Type  ☐ Certified Mail ☐ Registered ☐ Return Receipt for Merchandise ☐ Insured Mail ☐ C.O.D.
2. Article Numt	4. Restricted Delivery? (Extra Fee) ☐ Yes
(Transfer froi 7005 1820 0002	3461 1444
PS Form 3811, February 2004 Domestic Return	